



<b>PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)</b>		Docket Number: 740756-2707
In re Application of: Shunpei YAMAZAKI		
Application Number: 10/772,586		Filed: February 6, 2004
For: METHOD FOR PRODUCING SEMICONDUCTOR DEVICE AND DISPLAY DEVICE		
Group Art Unit: 2329		Confirmation No. 2329

This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.

The requested extension and appropriate entity fee are as follows (check time period desired):

- |  |          |
|--|----------|
| <input checked="" type="checkbox"/> One month (37 CFR 1.17(a)(1)) - (\$55/\$110) | \$110.00 |
| <input type="checkbox"/> Two months (37 CFR 1.17(a)(2)) - (\$210/\$420)          | \$ _____ |
| <input type="checkbox"/> Three months (37 CFR 1.17(a)(3)) - (\$475/\$950)        | \$ _____ |
| <input type="checkbox"/> Four months (37 CFR 1.17(a)(4)) - (\$740/\$1480)        | \$ _____ |
| <input type="checkbox"/> Five months (37 CFR 1.17(a)(5)) - (\$1005/\$2010)       | \$ _____ |
- ☐ Applicant claims small entity status.
- ☐ A check to cover the fee is enclosed.
- ☐ Payment by credit card. Form PTO-2038 is attached.
- ☐ The Commissioner has already been authorized to charge fees in this application to a Deposit Account.
- ☒ The Commissioner is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 19-2380 (740756-2707). I have enclosed a duplicate copy of this sheet.

I am the ☐ applicant/inventor

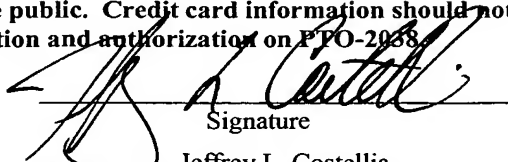
☐ assignee of record of the entire interest. See 37 CFR 3.71.  
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

☒ attorney or agent of record.

☐ attorney or agent under 37 CFR 1.34(a).  
Registration number if acting under 37 CFR 1.34(a) \_\_\_\_\_.

**WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.**

August 4, 2004  
Date

  
Signature  
Jeffrey L. Costellia  
Typed or printed name

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

<input type="checkbox"/> Total of _____ forms are submitted.
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08/05/2004 BSAYASI1 00000008 10772586

07 FC:1251 110.00 DA

SEND TO: Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

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